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10/23/01 U.S. PTO

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PTO/SB/05 (03-01)

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.:	1973.PSA
	First Inventor:	Dawn E. Smith
	Title:	Microsphere Adhesive Formulations
	Express Mail Label No.:	EL569397355US

10/23/01 U.S. PTO

10/050020

10/23/01

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231				
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>18</u>] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> <p>4. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <u>      </u>]</p> <p>5. <input type="checkbox"/> Oath or Declaration [Total Pages <u>      </u>]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>				
<b>ACCOMPANYING APPLICATION PARTS</b>					
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other _____</p>					
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a Preliminary Amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No. _____ / _____</p> <p>Prior application information: Examiner _____ Group/Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an Oath or Declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying Continuation or Divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>					
<b>19. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name	Cynthia L. Foulke				
Address	NATIONAL STARCH AND CHEMICAL COMPANY 10 FINDERNE AVENUE				
City	Bridgewater	State	New Jersey	Zip Code	08807-0500
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Name (Print/Type)	Cynthia L. Foulke	Registration No. (Attorney/Agent)	32,364		
Signature	<i>Cynthia L. Foulke</i>	Date	10/23/01		

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**FEE TRANSMITTAL**  
**for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) **740.00**

Complete if Known

Application Number

Filing Date **October 23, 2001**First Named Inventor **Dawn E. Smith**

Examiner Name

Group Art Unit

Attorney Docket No **I973.PSA****METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **14-0455**  
Deposit Account Name☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	<b>740.00</b>
106 320	206 160	Design filing fee	
107 490	207 245	Plant filing fee	
108 710	208 355	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$) **740.00****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
14	12** = 0	0	0
2	3** = 0	0	0
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
102 13	202 6	Claims in excess of 20
102 30	202 15	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim in excess of 3
108 30	208 15	Reissue independent claim over original claim
112 10	212 5	Reissue claim in excess of 3 and over original claim

SUBTOTAL (2) (\$) **0**

\*For number previously paid. \*Greater. For Reduced, see above.

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 100	205 55	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 100	139 100	Non-English specification	
147 2,320	147 2,320	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,340*	113 1,340*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 390	216 195	Extension for reply within second month	
117 390	217 195	Extension for reply within third month	
118 1,390	218 695	Extension for reply within fourth month	
128 1,390	228 695	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
108 510	108 510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1240	241 620	Petition to revive - unintentional	
142 1240	242 620	Utility issue fee (one fee issue)	
143 440	243 220	Design issue fee	
144 600	244 300	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.17(a)	
125 130	125 130	Submission of information Disclosure Stmt	
531 40	531 40	Recording each patent assignment per property, times number of properties	
45 710	245 355	Filing a submission after final rejection 37 CFR 3.13(a),	
49 710	249 355	For each additional invention to be examined 37 CFR 3.13(b)	
79 710	279 355	Request for Continued Examination (RCE)	
159 900	159 900	Request for extended examination or a design application	

Other fee specialty:

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)

**SUBMITTED BY**Name (Printed): **Cynthia L. Foulke**

Registration No. Attorney/Agent

**32,364**

Complete if applicable

Telephone **908-685-7483**

Signature

*Cynthia L. Foulke*

Date

**October 23, 2001****WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231